

AMENDED IN ASSEMBLY APRIL 13, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 1300

Introduced by Assembly Member Ridley-Thomas

February 27, 2015

An act to amend Sections 5001, 5008, 5013, 5150, 5150.05, 5150.1, 5150.2, 5151, 5152.1, 5153, and 5270.50 of, to add Sections 5001.5, 5022, 5023, 5024, 5025, 5026, 5150.3, 5151.1, and 5151.2 to, to add the heading of Article 1.3 (commencing with Section 5151) to, to add Article 1.1 (commencing with Section 5150.10) to, to add Article 1.2 (commencing with Section 5150.30) to, Chapter 2 of Part 1 of Division 5 of, to repeal Section 5150.4 of, and to repeal and add Section 5152.2 of, the Welfare and Institutions Code, relating to mental health.

LEGISLATIVE COUNSEL'S DIGEST

AB 1300, as amended, Ridley-Thomas. Mental health: involuntary commitment.

Under existing law, when a person, as a result of mental disorder, is a danger to others, or to himself or herself, or gravely disabled, he or she may, upon probable cause, be taken into custody by a peace officer, member of the attending staff of an evaluation facility, designated members of a mobile crisis team, or other designated professional person, and placed in a facility designated by the county and approved by the State Department of Health Care Services as a facility for 72-hour treatment and evaluation.

This bill would authorize counties to designate one or more persons to act as a local or regional liaison to assist a person who is a patient in an emergency department of a defined nondesignated hospital and who has been detained, or who may require detention, for evaluation and

treatment, as specified. The bill would reorganize and make changes to the provisions relating to the detention for evaluation and treatment of a person who may be subject to the above provisions, including specifying procedures for delivery of those individuals to various facilities; evaluation of the person for probable cause for detention for evaluation and treatment; terms and length of detention, where appropriate, in various types of facilities; and criteria for release from defined designated facilities and nondesignated hospitals. The bill would authorize a provider of ambulance services to transfer a person who is voluntarily transferring to a designated facility for evaluation and treatment. The bill would also make changes to the methods by which law enforcement is notified of the release of a person detained for evaluation and treatment.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 5001 of the Welfare and Institutions Code
- 2 is amended to read:
- 3 5001. The provisions of this part and Part 1.5 (commencing
- 4 with Section 5585) shall be construed to promote the legislative
- 5 intent as follows:
- 6 (a) To end the inappropriate, indefinite, and involuntary
- 7 commitment of persons with mental health disorders,
- 8 developmental disabilities, and chronic alcoholism, and to eliminate
- 9 legal disabilities.
- 10 (b) To provide prompt evaluation and treatment of persons with
- 11 mental health disorders or impaired by chronic alcoholism.
- 12 (c) To guarantee and protect public safety.
- 13 (d) To safeguard individual rights through judicial review.
- 14 (e) To provide individualized treatment, supervision, and
- 15 placement services by a conservatorship program for persons who
- 16 are gravely disabled.
- 17 (f) To encourage the full use of all existing agencies,
- 18 professional personnel, and public funds to accomplish these
- 19 objectives and to prevent duplication of services and unnecessary
- 20 expenditures.
- 21 (g) To protect persons with mental health disorders and
- 22 developmental disabilities from criminal acts.

1 (h) To provide consistent standards for protection of the personal
2 rights of persons receiving services under this part and under Part
3 1.5 (commencing with Section 5585).

4 (i) To provide services in the least restrictive setting appropriate
5 to the needs of each person receiving services under this part and
6 under Part 1.5 (commencing with Section 5585).

7 (j) To ensure that persons receive services from facilities and
8 providers that are qualified and best suited to provide the services,
9 and that persons are not detained in settings that are not therapeutic
10 or not designed to meet their needs.

11 (k) To affirm that no person may be presumed to be incompetent
12 because he or she has been evaluated or treated for a mental *health*
13 disorder or chronic alcoholism, regardless of whether that
14 evaluation or treatment was voluntarily or involuntarily received.

15 SEC. 2. Section 5001.5 is added to the Welfare and Institutions
16 Code, to read:

17 5001.5. It is the intent of the Legislature that each county shall
18 have the responsibility to ensure that all persons with mental *health*
19 disorders who are subject to detention under this part or under Part
20 1.5 (commencing with Section 5585) receive prompt evaluation
21 and treatment in accordance with this part and Part 1.5
22 (commencing with Section 5585), including prompt assessment
23 of the need for evaluation and treatment. It is the intent of the
24 Legislature that each county establish and maintain a mental health
25 service system that has sufficient capacity to ensure the provision
26 of services under this Part and Part 1.5 (commencing with Section
27 5585), including, at a minimum, the services required under
28 paragraph (2) of subdivision (a) of Section 5651.

29 SEC. 3. Section 5008 of the Welfare and Institutions Code is
30 amended to read:

31 5008. Unless the context otherwise requires, the following
32 definitions shall govern the construction of this part:

33 (a) "Antipsychotic medication" means medication customarily
34 prescribed for the treatment of symptoms of psychoses and other
35 severe mental and emotional disorders.

36 (b) "Application for detention for evaluation and treatment"
37 means the written application set forth in Section 5150.3.

38 (c) (1) "Assessment" means the determination, as described in
39 subdivision (b) of Section 5150 and Section 5151, of the following:

1 (A) Whether the person meets the criteria for detention for
2 evaluation and treatment.

3 (B) Whether the person is in need of evaluation and treatment
4 and, if so, what services are needed for the person.

5 (C) Whether the person can be properly served without being
6 detained, in which case the services shall be provided on a
7 voluntary basis.

8 (2) “Assessment” includes, but is not limited to, mental status
9 determination, analysis of clinical and social history, analysis of
10 relevant cultural issues and history, diagnosis, and the use of testing
11 procedures.

12 (d) “Authorized professional” means any of the following:

13 (1) ~~A person mental health professional or category of persons~~
14 ~~mental health professionals~~, excluding peace officers, who are
15 authorized in writing by a county to provide services described in
16 Article 1 (commencing with Section 5150) of Chapter 2, including
17 a probable cause determination for the detention of a person for
18 evaluation and treatment under Section 5150 and the release of a
19 person from detention for evaluation and treatment under Section
20 5150.15 this subdivision. An authorized professional shall have
21 appropriate training in mental health disorders and determination
22 of probable cause, and shall have relevant experience in providing
23 services to persons with mental health disorders.

24 (2) An authorized ~~member of the~~ professional as described in
25 paragraph (1) who is a member of the staff of a designated facility
26 and who is authorized by the facility to provide services described
27 in this subdivision.

28 (3) ~~An authorized~~ A member of a mobile crisis team who is
29 authorized in writing by a county to provide services described in
30 this subdivision.

31 (e) “Conservatorship investigation” means an investigation, by
32 an agency appointed or designated by the governing body, of cases
33 in which conservatorship is recommended pursuant to Chapter 3
34 (commencing with Section 5350).

35 (f) “Court,” unless otherwise specified, means a court of record.

36 (g) “Court-ordered evaluation” means an evaluation ordered by
37 a superior court pursuant to Article 2 (commencing with Section
38 5200) or by a superior court pursuant to Article 3 (commencing
39 with Section 5225) of Chapter 2.

(h) “Crisis intervention” consists of an interview or series of interviews within a brief period of time, conducted by qualified professionals, and designed to alleviate personal or family situations which present a serious and imminent threat to the health or stability of the person or the family. The interview or interviews may be conducted in the home of the person or family, or on an inpatient or outpatient basis with such therapy, or other services, as may be appropriate. The interview or interviews may include family members, significant support persons, providers, or other entities or individuals, as appropriate and as authorized by law. Crisis intervention may, as appropriate, include suicide prevention, psychiatric, welfare, psychological, legal, or other social services.

(i) “Crisis stabilization service or unit” means an ambulatory service that provides probable cause determinations and assessments, collateral services, and therapy within the scope of its designation under this part.

(j) “Department” means the State Department of Health Care Services.

(k) (1) “Designated facility” means a facility or a specific unit or part of a facility that is licensed or certified as a mental health evaluation facility, a mental health treatment facility, or a mental health evaluation and treatment facility. A designated facility may be an inpatient facility or an ambulatory facility.

(2) “Inpatient facility” means a health facility, or an inpatient unit of a health facility, as defined in Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code, that is licensed ~~and by the State of California~~, has the capability to admit and treat persons on an inpatient basis subject to the requirements of this ~~part~~. *part, and is designated by a county pursuant to Section 5023. Inpatient facility also includes a hospital or the inpatient unit of a hospital operated by the United States government that has the capability to admit and treat persons on an inpatient basis, subject to the requirements of this part, and that is designated by the county pursuant to Section 5023.* A designated inpatient facility includes any of the following:

(A) A general acute care hospital, as defined in subdivision (a) of Section 1250 of the Health and Safety Code.

(B) An acute psychiatric hospital, as defined in subdivision (b) of Section 1250 of the Health and Safety Code.

1 (C) A psychiatric health facility, as defined in Section 1250.2
2 of the Health and Safety Code.

3 (D) *A correctional treatment center, as defined in Section 1250*
4 *of the Health and Safety Code, operated by a county, city, or city*
5 *and county law enforcement agency. The department may approve*
6 *an unlicensed correctional treatment center that is in existence as*
7 *of January 1, 2016, if the correctional treatment center meets all*
8 *of the licensing requirements except those that are structurally*
9 *impracticable.*

10 (3) “Ambulatory facility” means a facility ~~or other provider~~
11 designated by a county under Section 5023 that provides
12 psychiatric services lasting less than 24 hours in accordance with
13 applicable law and within the scope of the designation. An
14 ambulatory facility may include an outpatient hospital department,
15 clinic, crisis stabilization ~~service facility~~ or unit, *facility of a*
16 medical group, facility of a provider organization other than a
17 medical group, or other facility that meets the requirements
18 established by the department in accordance with Section 5023.

19 (l) “Detained for evaluation and treatment” and “detention for
20 evaluation and treatment” mean the taking into custody and
21 detention of a person in accordance with Section 5150.

22 (m) “Emergency” means ~~a situation in which~~ *sudden marked*
23 *change in the person’s condition such that* action to impose
24 treatment over the person’s objection is immediately necessary
25 for the preservation of life or the prevention of serious bodily harm
26 to the patient or others, and it is impracticable to first gain consent.
27 It is not necessary for harm to take place or become unavoidable
28 prior to treatment.

29 (n) “Emergency transport provider” means a provider of
30 ambulance services licensed by the Department of the California
31 Highway Patrol or operated by a public safety agency and includes
32 the authorized personnel of an emergency transport provider who
33 are certified or licensed under Sections 1797.56, 1797.80, 1797.82,
34 and 1797.84 of the Health and Safety Code.

35 (o) “Evaluation” means a multidisciplinary professional analyses
36 of a person’s medical, psychological, educational, social, financial,
37 and legal conditions as may appear to constitute a problem. Persons
38 providing evaluation services shall be properly qualified
39 professionals and may be full-time employees, *part-time*
40 *employees*, or independent contractors of a county, designated

1 facility, or other agency providing face-to-face evaluation services;
2 ~~which services.~~ *Face-to-face evaluation services* includes
3 *face-to-face evaluation by means of telehealth.*

4 (p) (1) For purposes of Article 1 (commencing with Section
5 5150), Article 2 (commencing with Section 5200), and Article 4
6 (commencing with Section 5250) of Chapter 2, and for the purposes
7 of Chapter 3 (commencing with Section 5350), “gravely disabled”
8 means either of the following:

9 (A) A condition in which a person, as a result of a mental health
10 disorder, is unable to provide for his or her basic personal needs
11 for food, clothing, or shelter.

12 (B) A condition in which a person, has been found mentally
13 incompetent under Section 1370 of the Penal Code and all of the
14 following facts exist:

15 (i) The indictment or information pending against the person at
16 the time of commitment charges a felony involving death, great
17 bodily harm, or a serious threat to the physical well-being of
18 another person.

19 (ii) The indictment or information has not been dismissed.

20 (iii) As a result of a mental health disorder, the person is unable
21 to understand the nature and purpose of the proceedings taken
22 against him or her and to assist counsel in the conduct of his or
23 her defense in a rational manner.

24 (2) For purposes of Article 3 (commencing with Section 5225)
25 and Article 4 (commencing with Section 5250), of Chapter 2, and
26 for the purposes of Chapter 3 (commencing with Section 5350),
27 “gravely disabled” means a condition in which a person, as a result
28 of impairment by chronic alcoholism, is unable to provide for his
29 or her basic personal needs for food, clothing, or shelter.

30 (3) The term “gravely disabled” does not include persons with
31 intellectual disabilities by reason of that disability alone.

32 (q) “Intensive treatment” consists of hospital and other services
33 as may be indicated. Intensive treatment shall be provided by
34 properly qualified professionals and carried out in facilities
35 qualifying for reimbursement under the California Medical
36 Assistance Program (Medi-Cal) set forth in Chapter 7 (commencing
37 with Section 14000) of Part 3 of Division 9, or under Title XVIII
38 of the federal Social Security Act and regulations thereunder.
39 Intensive treatment may be provided in hospitals of the United
40 States government by properly qualified professionals. Nothing

1 in this part shall be construed to prohibit an intensive treatment
2 facility from also providing 72-hour evaluation and treatment.

3 (r) “Local or regional liaison” means a person or persons
4 authorized by a county, or by two or more counties acting jointly,
5 under Section 5024.

6 (s) “Mobile crisis team” means a team comprised of one or more
7 professionals, and which may also include peer counselors, who
8 are authorized by a county to provide probable cause
9 determinations and other services under this part.

10 (t) “Peace officer” means a duly sworn peace officer as that
11 term is defined in Chapter 4.5 (commencing with Section 830) of
12 Title 3 of Part 2 of the Penal Code who has completed the basic
13 training course established by the Commission on Peace Officer
14 Standards and Training, or any parole officer or probation officer
15 specified in Section 830.5 of the Penal Code when acting in relation
16 to cases for which he or she has a legally mandated responsibility.

17 (u) “Postcertification treatment” means an additional period of
18 treatment pursuant to Article 6 (commencing with Section 5300)
19 of Chapter 2.

20 (v) “Prepetition screening” is a screening of all petitions for
21 court-ordered evaluation as provided in Article 2 (commencing
22 with Section 5200) of Chapter 2, consisting of a professional
23 review of the petition; an interview with the petitioner and,
24 whenever possible, the person alleged, as a result of a mental health
25 disorder, to be a danger to others, or to himself or herself, or to be
26 gravely disabled, to assess the problem and explain the petition;
27 and when indicated, efforts to persuade the person to receive, on
28 a voluntary basis, comprehensive evaluation, crisis intervention,
29 referral, and other services specified in this part.

30 (w) “Probable cause determination” means a determination
31 whether there is probable cause for the detention of a person for
32 evaluation and treatment. *A probable cause determination shall*
33 *be based solely on the criteria for detaining a person for evaluation*
34 *and treatment pursuant to Section 5150. The probable cause*
35 *determination shall not consider the availability of beds or services*
36 *at designated facilities within or outside of the county.*

37 (x) “Professional person in charge of a facility” means the
38 licensed person authorized by a designated facility who is
39 responsible for the clinical direction of the designated facility.

1 (y) “Professional staff” means the medical staff or other
2 organized professional staff of an inpatient facility.

3 (z) “Referral” means referral of persons by each facility,
4 provider, or other organization providing assessment, evaluation,
5 crisis intervention, or treatment services to other facilities,
6 providers, or agencies in accordance with Section 5013 and Part
7 1.5 (commencing with Section 5585).

8 (aa) “Telehealth” means the telehealth services, as defined in
9 paragraph (6) of subdivision (a) of Section 2290.5 of the Business
10 and Professions Code, for the purpose of providing services under
11 this part, including a probable cause determination, the release of
12 a person from detention for evaluation and treatment under Section
13 5150.15, assessment or evaluation, and treatment. For purposes
14 of this part, telehealth services may be used by any licensed
15 professional, including a psychologist, clinical social worker, and
16 other mental health professional, acting within the scope of his or
17 her profession for providing evaluation, treatment, consultation,
18 or other mental health services under this part.

19 SEC. 4. Section 5013 of the Welfare and Institutions Code is
20 amended to read:

21 5013. (a) The purpose of a referral shall be to provide for
22 continuity of care *and services*. A referral may include, but need
23 not be limited to, informing the person of available services,
24 making appointments on the person’s behalf, communication with
25 the agency or individual to which the person has been referred,
26 appraising the outcome of referrals, and arranging for escort,
27 transportation, or both, when necessary. ~~A referral shall be~~
28 ~~considered complete when the agency or individual to whom the~~
29 ~~person has been referred accepts responsibility for providing the~~
30 ~~necessary services.~~ All persons shall be advised of available precare
31 services that prevent initial recourse to hospital treatment or
32 aftercare services that support adjustment to community living
33 following hospital treatment. These services may be provided
34 through county or city mental health departments, state hospitals
35 under the jurisdiction of the State Department of State Hospitals,
36 regional centers under contract with the State Department of
37 Developmental Services, or other public or private entities.

38 (b) It is the intent of the Legislature that referrals between
39 facilities, providers, and other organizations shall be facilitated by

1 the sharing of information and records in accordance with Section
2 5328 and applicable federal and state laws.

3 (c) Each city or county behavioral health department is
4 encouraged to include on its Internet Web site a current list of
5 ambulatory behavioral health services and other resources for
6 persons with behavioral health disorders and substance use
7 disorders in the city or county that may be accessed by providers
8 and consumers of behavioral health services. The list of services
9 on the Internet Web site should be updated at least annually by the
10 city or county behavioral health department.

11 SEC. 5. Section 5022 is added to the Welfare and Institutions
12 Code, to read:

13 5022. The department shall promote the consistent statewide
14 application of this part in order to ensure protection of the personal
15 rights of all persons who are subject to this part and Part 1.5
16 (commencing with Section 5585). The department shall provide
17 oversight of the statewide application of this part and facilitate
18 discussion among the organizations listed in subdivision (a) of
19 Section 5400, law enforcement agencies, hospitals, mental health
20 professionals, county patients' rights advocates, *the California*
21 *Office of Patients' Rights*, and other stakeholders as may be
22 necessary or desirable to achieve the legislative intent of consistent
23 statewide application. These discussions shall include situations
24 where persons are certified for additional intensive treatment in a
25 county authorizing that treatment under Article 4.7 (commencing
26 with Section 5270.10) of Chapter 2 who are then transferred to a
27 facility during the course of additional intensive treatment in a
28 county that has not authorized additional intensive treatment.

29 SEC. 6. Section 5023 is added to the Welfare and Institutions
30 Code, to read:

31 5023. (a) Each county may designate *inpatient and ambulatory*
32 *facilities within the county, with the approval by of the department,*
33 *that meet the applicable requirements established by the department*
34 *by regulation. An outpatient or emergency department of a*
35 *nondesignated inpatient facility may be designated as an*
36 *ambulatory facility if it meets all the requirements for certification*
37 *as an ambulatory facility.*

38 (b) (1) Each county may designate ambulatory facilities within
39 the county that meet the behavioral health needs of persons within
40 the requirements of applicable law and the scope of their

1 designation. The department shall encourage counties to use
2 appropriate ambulatory facilities for the evaluation and treatment
3 of persons pursuant to this part.

4 (2) Counties, mental health professionals, providers, and other
5 organizations, with the support of the department, are encouraged
6 to establish crisis stabilization services and other ambulatory
7 facilities that are designated by a county to provide probable cause
8 determinations and assessments, and, as applicable, evaluation and
9 treatment services and crisis stabilization services, in settings that
10 are appropriate to the needs of persons with severe mental illness
11 and less restrictive than inpatient health facilities.

12 (3) Nothing in this subdivision shall preclude the designation
13 of an ambulatory facility that is an outpatient clinic of a licensed
14 health facility.

15 (4) An ambulatory facility shall provide services within the
16 scope of its designation to all persons regardless of their place of
17 residence.

18 (c) Regulations adopted pursuant to this part establishing staffing
19 standards for designated facilities shall be consistent with
20 applicable licensing regulations for the type of facility. If there are
21 no licensing regulations for the type of designated facility, or for
22 certain categories of professional personnel providing services in
23 a type of designated facility, the regulations adopted pursuant to
24 this part for staffing standards may differentiate between the types
25 of designated facilities, including ambulatory facilities. On January
26 1, 2016, the existing regulations establishing staffing standards
27 for designated facilities set forth in Section 663 of Title 9 of the
28 California Code of Regulations are repealed and nullified.

29 ~~(d) A county may contract with a facility or other provider in~~
30 ~~an adjacent state that, within the discretion and oversight of the~~
31 ~~county, will meet the needs of county residents under this part and~~
32 ~~that has agreed in writing to meet the terms and conditions~~
33 ~~established by the county for the scope of services to be performed~~
34 ~~by the facility or other provider. The terms and conditions shall~~
35 ~~include the protection of a person's rights under Article 7~~
36 ~~(commencing with Section 5325) of Chapter 2 and access to~~
37 ~~persons placed in the facility by patients' right advocates of the~~
38 ~~contracting county.~~

39 (e)

1 (d) A county shall not charge or assess a fee for the designation
2 of ~~an ambulatory~~ a facility or ~~the approval of~~ an authorized
3 professional.

4 ~~(f)~~

5 (e) Each designated facility shall accept, within its clinical
6 capability and capacity, all categories of persons for whom it is
7 designated, without regard to insurance or financial status. If a
8 person presents to a designated facility with a psychiatric
9 emergency medical condition, as defined in subdivision (f) of
10 Section 5150.10, that is beyond its capability, the facility shall
11 assist the person in obtaining emergency services and care at an
12 appropriate facility.

13 ~~(g)~~

14 (f) In order to provide access by members of the public to
15 information about designated facilities, each county department
16 responsible for mental health services shall maintain on its Internet
17 Web site the locations of all designated facilities within the county,
18 including address, the types of services available at each designated
19 facility, and the hours of operation for ambulatory facilities. The
20 Internet Web site shall be updated if there are changes to the
21 information.

22 ~~(h)~~

23 (g) Each county shall report to the department, on at least an
24 annual basis, a current list of designated facilities within the county,
25 including the name and address of each facility and its facility
26 type. The department shall maintain a list of designated facilities,
27 by county and facility licensure type, on its Internet Web site, and
28 update the list not less than annually. The department Internet Web
29 site shall also contain links to each county Internet Web site
30 required by subdivision ~~(g)~~ (f).

31 ~~(i)~~

32 (h) Counties are encouraged to share information with adjacent
33 and other counties with respect to its roster of authorized
34 professionals. An authorized professional shall not be required to
35 obtain approval from another county to be an authorized
36 professional in that county in order to take action under this part.

37 SEC. 7. Section 5024 is added to the Welfare and Institutions
38 Code, to read:

39 5024. (a) Each county may authorize one or more qualified
40 persons to act as a local or regional liaison to assist nondesignated

1 hospitals in the county in accordance with this section and Article
2 1.1 (commencing with Section 5150.10) of Chapter 2. Two or
3 more counties may enter into an ~~inter-county~~ *intercounty*
4 arrangement under which the participating counties agree to
5 authorize one or more persons to act as a local or regional liaison
6 to assist nondesignated hospitals in the participating counties in
7 accordance with this section and Article 1.1 (commencing with
8 Section 5150.10) of Chapter 2.

9 (b) The role of the local or regional liaison is to assist a person
10 who is a patient in an emergency department of a nondesignated
11 hospital and who has been detained, or may require detention, for
12 evaluation and treatment. The assistance may include any of the
13 following:

14 (1) Arranging for an authorized professional to provide a prompt
15 probable cause determination under Section 5150.13.

16 (2) Arranging for an authorized professional to determine
17 whether the detention for evaluation and treatment of a person
18 shall be released under Section 5150.15.

19 (3) Arranging for the placement of a person detained for
20 evaluation and treatment who ~~is~~ *has been* medically ~~clear~~ *stabilized*
21 for transfer or discharge to a designated facility.

22 (c) A local or regional liaison may be employed by, or may
23 contract with, a county or counties and may include personnel of
24 one or more designated facilities within the county or counties.
25 The role of the local or regional liaison may be rotated among the
26 categories of persons described in this subdivision.

27 (d) A local or regional liaison shall be available 24 hours a day,
28 including weekends and holidays, to provide assistance under this
29 section.

30 (e) Each county, or counties acting jointly under this section,
31 shall provide the nondesignated hospitals in the county or counties
32 with the contact information for a local or regional liaison. The
33 means of contact may be a designated telephone number, email,
34 text-messaging or other electronic means, or any combination of
35 the foregoing, so long as the local or regional liaison has immediate
36 access to the means of contact. The contact information provided
37 to nondesignated hospitals shall be updated as necessary.

38 (f) This section shall not apply to a county that has not
39 authorized a local or regional liaison.

SEC. 8. Section 5025 is added to the Welfare and Institutions Code, to read:

5025. (a) A designated facility or nondesignated hospital, as defined in subdivision (e) of Section 5150.10, or a physician, employee, or other staff person acting within the scope of his or her official duties or employment for the designated facility or nondesignated hospital shall not be liable for any injury resulting from determining any of the following:

(1) Whether to detain a person for a mental health ~~disorder or addiction~~, *disorder, inebriation, chronic alcoholism, or the use of narcotics or a restricted dangerous drug* in accordance with this part.

(2) The terms, conditions, and enforcement of detention for a person with a mental health ~~disorder or addiction~~, *disorder, inebriation, chronic alcoholism, or the use of narcotics or a restricted dangerous drug* in accordance with this part.

(3) Whether to release a person detained for a mental health ~~disorder or addiction~~, *disorder, inebriation, chronic alcoholism, or the use of narcotics or a restricted dangerous drug* in accordance with this part.

(b) A physician, employee, or other staff person acting within the scope of his or her official duties or employment for a designated facility or nondesignated hospital shall ~~be not be~~ liable for carrying out a determination described in subdivision (a) so long as he or she uses due care.

~~(c) Nothing in this section shall exonerate a physician, employee, or other staff person acting within the scope of his or her official duties or employment for a designated facility or nondesignated hospital from liability for injury proximately caused by his or her negligent or wrongful act or omission in carrying out or failing to carry out any of the following:~~

~~(1) A determination to detain or not to detain a person for a mental health disorder or addiction, in accordance with this part.~~

~~(2) The terms or conditions of detention of a person for a mental health disorder or addiction, in accordance with this part.~~

~~(3) A determination to release a person detained for a mental health disorder or addiction, in accordance with this part.~~

SEC. 9. Section 5026 is added to the Welfare and Institutions Code, to read:

1 5026. (a) A designated facility or nondesignated hospital, as
2 defined in subdivision (e) of Section 5150.10, or a physician,
3 employee, or other staff person acting within the scope of his or
4 her official duties or employment for the designated facility or
5 nondesignated hospital shall not be liable for any of the following:

6 (1) An injury caused by an eloping or eloped person who has
7 been detained for a mental health disorder or addiction.

8 (2) An injury to, or the wrongful death of, an eloping or eloped
9 person who has been detained for a mental health disorder or
10 addiction.

11 (b) Nothing in this section shall exonerate a physician,
12 employee, or other staff person acting within the scope of his or
13 her official duties or employment for a designated facility or
14 nondesignated hospital from liability ~~in either of the following~~
15 ~~situations: if he or she acted or failed to act because of actual~~
16 ~~fraud, corruption, or actual malice.~~

17 ~~(1) If he or she acted or failed to act because of actual fraud,~~
18 ~~corruption, or actual malice.~~

19 ~~(2) For injuries inflicted as a result of his or her own negligent~~
20 ~~or wrongful act or omission on an eloping or eloped person who~~
21 ~~has been detained for a mental health disorder or addiction under~~
22 ~~this part, in an effort to enforce the detention.~~

23 SEC. 10. Section 5150 of the Welfare and Institutions Code is
24 amended to read:

25 5150. (a) When a person, as a result of a mental health
26 disorder, is a danger to others, or to himself or herself, or gravely
27 disabled, a peace officer or an authorized professional acting within
28 the scope of his or her authorization may, upon probable cause,
29 take, or cause to be taken, the person into custody for a period of
30 up to 72 hours for assessment, evaluation, and crisis intervention,
31 or placement for evaluation and treatment in a facility designated
32 by the county for evaluation and treatment and approved by the
33 department. At a minimum, assessment, as defined in subdivision
34 (c) of Section 5008, and evaluation, as defined in subdivision (n)
35 of Section 5008, shall be conducted and provided on an ongoing
36 basis. Crisis intervention, as defined in subdivision (g) of Section
37 5008, may be provided concurrently with assessment, evaluation,
38 or any other service. The period of 72-hour detention for evaluation
39 and treatment shall begin at the time that the person is initially
40 detained pursuant to this section.

1 (b) (1) When an individual detained pursuant to subdivision
2 (a) is taken to a designated facility for evaluation and treatment,
3 the professional person in charge, a member of the attending staff
4 of the designated facility, or an authorized professional acting
5 within the scope of his or her authorization by the county, shall
6 assess the person to determine whether he or she can be properly
7 served without being detained. ~~The assessment under this~~
8 ~~subdivision may be performed by an authorized professional in a~~
9 ~~designated ambulatory facility or any other setting in accordance~~
10 ~~with paragraph (2) of this subdivision and Section 5151. The~~
11 ~~assessment shall be performed based on the clinical condition and~~
12 ~~needs of a person detained for evaluation and treatment. This~~
13 ~~section shall not be construed to prevent an authorized professional~~
14 ~~from providing consultation or other professional assistance by~~
15 ~~telehealth. If in the judgment of the authorized professional, the~~
16 ~~person can be properly served without being detained, he or she~~
17 ~~shall be provided evaluation, crisis intervention, or other inpatient~~
18 ~~or outpatient services on a voluntary basis.~~

19 (2) If the person detained for evaluation and treatment is taken
20 to a designated ambulatory facility that is authorized by the county
21 to conduct an assessment, the assessment shall be conducted by
22 the professional person in charge of the designated ambulatory
23 facility or his or her designee acting within the scope of his or her
24 licensed profession. The assessment in a designated ambulatory
25 facility may be performed by or in consultation with an authorized
26 member of the professional staff of a designated inpatient facility
27 using telehealth if the designated inpatient facility has agreed to
28 admit the person in accordance with subdivision (a) upon a
29 determination that an involuntary admission is appropriate.

30 (3) ~~Nothing in this~~ This section shall *not* be ~~interpreted~~ *construed*
31 to prevent a peace officer, or an authorized professional employee
32 of an emergency transport provider acting at the direction of the
33 peace officer, from delivering individuals to a designated facility
34 for an assessment under this section. Furthermore, the assessment
35 requirement of this section shall not be ~~interpreted~~ *construed* to
36 require peace officers or authorized professional employees of
37 emergency transport providers acting at the direction of the peace
38 officer to perform any additional duties other than those specified
39 in Sections 5150.1 and 5150.2.

(4) If an individual detained under subdivision (a) is *first* taken to an emergency department of a nondesignated hospital, as defined in subdivision (e) of Section 5150.10, the provisions of Article 1.1 (commencing with Section 5150.10) shall apply to the individual during his or her stay in the emergency department of a nondesignated hospital. This section does not require the peace officer or authorized professional who detained the individual pursuant to subdivision (a) to take or cause to take the individual to be taken to an emergency department of a nondesignated hospital.

~~(5) The assessment may be performed, based on the clinical condition and needs of a person detained for evaluation and treatment, in either a designated inpatient facility, a designated ambulatory facility, or any other setting. Nothing in this section shall be construed to prevent an authorized member of the professional staff of a designated inpatient facility from providing consultation or other professional assistance by telehealth for a person detained for evaluation and treatment in a designated ambulatory facility or other setting.~~

~~(6)~~

(5) Notwithstanding paragraph (2) of subdivision (j) of Section 5008, or any regulation, if a person detained for evaluation and treatment presents or is transferred to a designated ambulatory facility, and *following a new determination of probable cause*, the professional person in charge of the designated ambulatory facility or his or her designee determines that the person *continues to meet the criteria for detention under Section 5150 and* should be admitted to a designated inpatient facility for further evaluation and treatment, the designated ambulatory facility shall make *and document* good faith efforts to arrange placement for the person in a designated inpatient facility. ~~If Subject to the requirements of subdivision (a), if~~ the designated ambulatory facility has been unable to arrange placement for the person in a designated inpatient facility within 24 hours, the designated ambulatory facility shall continue to provide evaluation and treatment for the person beyond 24 hours in order to arrange for placement and transfer of the person to a designated inpatient facility, provided the designated ambulatory facility, *prior to the expiration of the 24 hours*, notifies the county in which it is located and the mental health *patients' rights* advocate for the county that it is continuing to detain the

1 person beyond 24 hours. The designated ambulatory facility shall
2 not transfer or send a person to an emergency department of a
3 nondesignated hospital—~~except if~~ *unless* the person requires
4 examination or treatment for a medical condition that is beyond
5 the capability of the designated ambulatory facility.

6 (c) Whenever a person is evaluated by an authorized professional
7 and is found to be in need of mental health services, but is not
8 admitted to the facility, all available alternative services provided
9 pursuant to subdivision (b) shall be offered as determined by the
10 county mental health director.

11 (d) If, in the judgment of the authorized professional, the person
12 cannot be properly served without being detained, the admitting
13 facility shall require an application in writing pursuant to Section
14 5150.3.

15 (e) At the time a person is taken into custody for evaluation, or
16 within a reasonable time thereafter, unless a responsible relative
17 or the guardian or conservator of the person is in possession of the
18 person's personal property, the person taking him or her into
19 custody shall take reasonable precautions to preserve and safeguard
20 the personal property in the possession of or on the premises
21 occupied by the person. The person taking him or her into custody
22 shall then furnish to the court a report generally describing the
23 person's property so preserved and safeguarded and its disposition,
24 in substantially the form set forth in Section 5211, except that if
25 a responsible relative or the guardian or conservator of the person
26 is in possession of the person's property, the report shall include
27 only the name of the relative or guardian or conservator and the
28 location of the property, whereupon responsibility of the person
29 taking him or her into custody for that property shall terminate.
30 As used in this section, "responsible relative" includes the spouse,
31 parent, adult child, domestic partner, grandparent, grandchild, or
32 adult brother or sister of the person.

33 (f) (1) Each person, at the time he or she is first taken into
34 custody under this section, shall be provided, by the person who
35 takes him or her into custody, the following information orally in
36 a language or modality accessible to the person. If the person
37 cannot understand an oral advisement, the information shall be
38 provided in writing. The information shall be in substantially the
39 following form:

1 My name is _____ .

2 I am a _____ .

3 (peace officer/mental health professional)

4 with _____ .

5 (name of agency)

6 You are not under criminal arrest, but I am taking you for an examination by

7 mental health professionals at _____ .

8 _____
9 (name of facility)

10 You will be told your rights by the mental health staff.

11
12 (2) If taken into custody at his or her own residence, the person
13 shall also be provided the following information:

14
15 You may bring a few personal items with you, which I will have
16 to approve. Please inform me if you need assistance turning off
17 any appliance or water. You may make a phone call and leave a
18 note to tell your friends or family where you have been taken.
19

20 (g) The designated facility shall keep, for each patient evaluated,
21 a record of the advisement given pursuant to subdivision (f) which
22 shall include all of the following:

- 23 (1) The name of the person detained for evaluation.
24 (2) The name and position of the peace officer or mental health
25 professional taking the person into custody.
26 (3) The date the advisement was completed.
27 (4) Whether the advisement was completed.
28 (5) The language or modality used to give the advisement.
29 (6) If the advisement was not completed, a statement of good
30 cause, as defined by regulations of the State Department of Health
31 Care Services.

32 (h) ~~(4)~~ Each person admitted to a facility designated by the
33 county for evaluation and treatment shall be given the following
34 information by admission staff of the facility. The information
35 shall be given orally and in writing and in a language or modality
36 accessible to the person. The written information shall be available
37 to the person in English and in the language that is the person's
38 primary means of communication. Accommodations for other

disabilities that may affect communication shall also be provided.
The information shall be in substantially the following form:

My name is _____.
My position here is _____.

You are being placed into this psychiatric facility because it is our
professional opinion that, as a result of a mental health disorder, you are likely
to (check applicable):

- ☐ Harm yourself.
- ☐ Harm someone else.
- ☐ Be unable to take care of your own food, clothing, and housing needs.

We believe this is true because

(list of the facts upon which the allegation of dangerous
or gravely disabled due to mental health disorder is based, including pertinent
facts arising from the admission interview).

You will be held for a period up to 72 hours. During the 72 hours you may
also be transferred to another facility. You may request to be evaluated or
treated at a facility of your choice. You may request to be evaluated or treated
by a mental health professional of your choice. We cannot guarantee the facility
or mental health professional you choose will be available, but we will honor
your choice if we can.

During these 72 hours you will be evaluated by the facility staff, and you
may be given treatment, including medications. It is possible for you to be
released before the end of the 72 hours. But if the staff decides that you need
continued treatment you can be held for a longer period of time. If you are
held longer than 72 hours, you have the right to a lawyer and a qualified
interpreter and a hearing before a judge. If you are unable to pay for the lawyer,
then one will be provided to you free of charge.

If you have questions about your legal rights, you may contact the county
Patients' Rights Advocate at _____
(phone number for the county Patients' Rights

Advocacy office)

Your 72-hour period began _____
(date/time)

~~(2) If the notice is given in a county where weekends and
holidays are excluded from the 72-hour period, the patient shall
be informed of this fact.~~

1 (i) For each patient admitted for evaluation and treatment, the
2 facility shall keep with the patient's medical record a record of the
3 advisement given pursuant to subdivision (h), which shall include
4 all of the following:

- 5 (1) The name of the person performing the advisement.
- 6 (2) The date of the advisement.
- 7 (3) Whether the advisement was completed.
- 8 (4) The language or modality used to communicate the
9 advisement.
- 10 (5) If the advisement was not completed, a statement of good
11 cause.

12 SEC. 11. Section 5150.05 of the Welfare and Institutions Code
13 is amended to read:

14 5150.05. (a) When determining if probable cause exists to
15 take a person into custody, or cause a person to be taken into
16 custody, pursuant to Section 5150, a person who is authorized to
17 take that person, or cause that person to be taken, into custody
18 pursuant to that section shall consider available relevant
19 information about the historical course of the person's mental
20 disorder if the authorized person determines that the information
21 has a reasonable bearing on the determination as to whether the
22 person is a danger to others, or to himself or herself, or is gravely
23 disabled as a result of the mental disorder.

24 (b) For purposes of this section, "information about the historical
25 course of the person's mental disorder" includes evidence presented
26 by the person who has provided or is providing mental health or
27 related support services to the person subject to a determination
28 described in subdivision (a), evidence presented by one or more
29 members of the family of that person, and evidence presented by
30 the person subject to a determination described in subdivision (a)
31 or anyone designated by that person.

32 (c) If the probable cause in subdivision (a) is based on the
33 statement of a person other than one authorized to take the person
34 into custody pursuant to Section 5150, the person making the
35 statement shall be liable in a civil action for intentionally giving
36 a statement that he or she knows to be false.

37 (d) This section shall not be applied to limit the application of
38 Section 5328.

39 SEC. 12. Section 5150.1 of the Welfare and Institutions Code
40 is amended to read:

1 5150.1. (a) A peace officer or authorized professional
2 employee of an emergency transport provider acting at the direction
3 of a peace officer, seeking to transport, or having transported, a
4 person to a designated facility for assessment pursuant to
5 *subdivision (a) of Section 5150 or Section 5151*, shall not be
6 instructed by mental health personnel to take the person to, or keep
7 the person at, a jail solely because of the unavailability of an acute
8 bed. The peace officer or the authorized professional employee of
9 an emergency transport provider acting at the direction of the peace
10 officer, shall not be forbidden to transport the person directly to
11 the designated facility. No mental health employee from any
12 county, state, city, or any private agency providing psychiatric
13 emergency services shall interfere with a peace officer or an
14 authorized professional employee of an emergency transport
15 provider acting at the direction of a peace officer performing duties
16 under Section 5150 by preventing the peace officer from detaining
17 a person for evaluation and treatment or preventing the peace
18 officer or an authorized professional employee of an emergency
19 transport provider acting at the direction of a peace officer from
20 entering a designated facility with the person for an assessment.
21 An employee of a facility shall not require the peace officer or an
22 authorized professional employee of an emergency transport
23 provider acting at the direction of a peace officer to remove the
24 person without an assessment as a condition of allowing the peace
25 officer or an authorized professional employee of an emergency
26 transport provider acting at the direction of a peace officer to
27 depart.

28 (b) An emergency transport provider, or any certified or licensed
29 personnel of an emergency transport provider, shall not be civilly
30 or criminally liable for any of the following that may be applicable
31 to the transport of a person who has been detained for evaluation
32 and treatment:

33 (1) The continuation of the detention for evaluation and
34 treatment while transporting the person to a designated facility or
35 an emergency department of a nondesignated hospital at the
36 direction of a peace officer or authorized professional who detained
37 the person for evaluation and treatment.

38 (2) The continuation of the detention for evaluation and
39 treatment while transporting the person detained for evaluation
40 and treatment to a designated facility or an emergency department

1 of a nondesignated hospital at the direction of the treating
2 emergency professional in an emergency department of a
3 nondesignated hospital for an assessment or other service under
4 Section 5151.

5 (c) For purposes of this section, “peace officer” means a peace
6 officer as defined in Chapter 4.5 (commencing with Section 830)
7 of Title 3 of Part 2 of the Penal Code and also includes a jailer
8 seeking to transport or transporting a person in custody to a
9 designated facility for an assessment consistent with Section 4011.6
10 or 4011.8 of the Penal Code and Section 5150.

11 SEC. 13. Section 5150.2 of the Welfare and Institutions Code
12 is amended to read:

13 5150.2. In each county, whenever a peace officer or the
14 authorized professional employee of an emergency transport
15 provider acting at the direction of the peace officer has transported
16 a person to a designated facility for an assessment, the officer or
17 professional employee of an emergency transporter shall be
18 detained no longer than the time necessary to complete
19 documentation of the factual basis of the detention for evaluation
20 and treatment and effectuate a prompt, safe, and orderly transfer
21 of physical custody of the person.

22 SEC. 14. Section 5150.3 is added to the Welfare and
23 Institutions Code, to read:

24 5150.3. (a) (1) ~~The peace officer, officer or an authorized~~
25 ~~professional acting within the scope of his or her authorization by~~
26 ~~the county, who takes a person into custody or otherwise initially~~
27 ~~detains a person pursuant to Section 5150~~ shall complete and sign
28 an application for detention for evaluation and treatment, in the
29 form prescribed by subdivision (g), stating the circumstances under
30 which the person’s condition was called to the attention of the
31 peace officer or authorized professional, and stating that the peace
32 officer or authorized professional has probable cause to believe
33 that the person is, as a result of a mental health disorder, a danger
34 to others, or to himself or herself, or gravely disabled.

35 (2) The documentation shall include detailed information
36 regarding the factual circumstances and observations constituting
37 probable cause for the peace officer or authorized professional to
38 believe that the person should be detained for evaluation and
39 treatment in accordance with Section 5150. If the probable cause
40 is based on the statement of a person other than the peace officer

1 or authorized professional, the person shall be liable in a civil
2 action for intentionally giving a statement that he or she knows is
3 false.

4 (3) A designated facility or nondesignated hospital shall require
5 presentation of the application as a condition of continuation of
6 the detention for evaluation and treatment. If the application is not
7 presented to the designated facility or nondesignated hospital, as
8 applicable, the person shall be immediately released from detention
9 for evaluation and treatment.

10 (4) An application for detention for evaluation and treatment
11 shall be valid in all counties to which the person may be taken to
12 a designated facility.

13 (b) (1) If the person detained by a peace officer or authorized
14 professional is in a location other than a designated facility or
15 nondesignated hospital, the original or copy of the application for
16 detention for evaluation and treatment shall be presented to the
17 designated facility under paragraph (2) or the nondesignated
18 hospital under paragraph (3).

19 (2) If after detention under Section 5150, the person is first taken
20 to a designated facility, the original or a copy of the signed
21 application for detention for evaluation and treatment shall be
22 presented to the designated facility.

23 (3) If after detention under Section 5150, the person is first taken
24 to a nondesignated hospital, the original or a copy of the signed
25 application for detention for evaluation and treatment shall be
26 presented to the nondesignated hospital. If the person is
27 subsequently transferred to a designated facility, the nondesignated
28 hospital shall deliver the original or a copy of the signed application
29 for detention for evaluation and treatment to the designated facility.
30 If the person is discharged from the nondesignated hospital under
31 Section 5150.15 or 5150.16, without a transfer to a designated
32 facility, the nondesignated hospital shall maintain the original or
33 a copy of the original signed application for detention for
34 evaluation and treatment.

35 (c) If a person detained for evaluation and treatment is
36 subsequently released from detention for evaluation and treatment
37 pursuant to Section 5150.15 or 5151, the application for detention
38 for evaluation and treatment in the possession of a designated
39 facility or nondesignated hospital shall be retained for the period

1 of time required by the medical records retention policy of the
2 designated facility or nondesignated hospital.

3 (d) The determination of a peace officer or authorized
4 professional to detain a person under Section 5150 and complete
5 and sign an application for detention for evaluation and treatment,
6 shall be based solely on whether the person meets the criteria for
7 detention for evaluation and treatment as set forth in ~~Sections 5150~~
8 ~~and 5150.05~~ *Section 5150*. The determination shall not be delayed,
9 denied, or refused based on the availability of beds or services at
10 designated facilities to which a person may be taken under this
11 article.

12 (e) If a person detained for evaluation and treatment under
13 Section 5150 is transported by a professional employee of an
14 emergency transport provider to a designated facility or
15 nondesignated hospital at the request of a peace officer or an
16 authorized professional, the peace officer or authorized professional
17 shall give the application for detention for evaluation and treatment
18 to the professional employee of the emergency transport provider
19 if the peace officer or authorized professional does not accompany
20 the person to the designated facility or nondesignated hospital.

21 (f) A copy of the application for detention for evaluation and
22 treatment shall be given to an emergency transport provider if the
23 person detained for evaluation and treatment is transported from
24 a nondesignated hospital to a designated facility or from a
25 designated facility to another designated facility.

26 (g) Not later than July 1, 2016, the department shall adopt and
27 make available a standardized form of the application for detention
28 for evaluation and treatment that shall be used by peace officers
29 and authorized professionals to apply for detention of a person for
30 evaluation and treatment under Section 5150 and by authorized
31 professionals to release a person from detention for evaluation and
32 treatment pursuant to Section 5150.15 or 5151. In developing the
33 form, the department shall request comments from stakeholders
34 including the organizations described in subdivision (b) of Section
35 5400. The form of the application for detention for evaluation and
36 treatment shall, at a minimum, provide all of the following:

37 (1) A description of the person's behavior and other relevant
38 facts that provide the basis for probable cause under Sections 5150
39 and 5150.05 of the person's detainment for evaluation and
40 treatment.

(2) For persons detained for evaluation and treatment who are first taken to an emergency department of a nondesignated hospital, documentation of the facts and conclusions that provide the basis for the determination of medical clearance, excluding a psychiatric emergency medical condition, by the emergency professional treating the person in the emergency department to transfer the person to a designated facility.

(3) Documentation of the facts and conclusions that provide the basis for the determination by an authorized professional authorized to perform an assessment that the person should be admitted for involuntary evaluation and treatment under Section 5152.

(4) Determination of the facts and conclusions that support the determination by an authorized professional authorized to release a person from detention in accordance with Section 5150.14 or 5151.

(5) Request by a peace officer under Section 5152.1 for notification of the person's release or discharge by a designated facility or nondesignated hospital.

(6) *All of the information required by subdivision (f) of Section 5150.*

SEC. 15. Section 5150.4 of the Welfare and Institutions Code is repealed.

SEC. 16. Article 1.1 (commencing with Section 5150.10) is added to Chapter 2 of Part 1 of Division 5 of the Welfare and Institutions Code, to read:

Article 1.1. Persons Detained in Nondesignated Hospitals

5150.10. Unless the context otherwise requires, the following definitions shall govern the construction of this article:

(a) "Emergency department of a nondesignated hospital" means a basic, comprehensive, or standby emergency medical service that is approved by the State Department of Public Health as a special or supplemental service of a nondesignated hospital. For purposes of this part, an emergency department of a nondesignated hospital shall include an observation or similar unit of the hospital that meets both of the following criteria:

(1) The unit is operated under the direction and policies of the emergency department.

(2) The unit provides continuing emergency services and care to patients prior to an inpatient admission, transfer, or discharge.

(b) “Emergency professional” means either of the following:

(1) A physician and surgeon who is board certified or pursuing board certification in emergency medicine, or a qualified licensed person, as defined in subdivision (g), during any scheduled period that he or she is on duty to provide medical screening and treatment of patients in an emergency department of a nondesignated hospital.

(2) A physician and surgeon, or a qualified licensed person, as defined in subdivision (g), during any scheduled period that he or she is on duty to provide medical screening and treatment of patients in the emergency department of a nondesignated hospital that is a critical access hospital within the meaning of Section 1250.7 of the Health and Safety Code. A physician and surgeon on duty under this paragraph shall include a physician and surgeon on call for a standby emergency medical service who is responsible to provide professional coverage for the emergency department. A physician and surgeon on duty under this paragraph does not include a physician and surgeon who is providing on-call specialty coverage services to the emergency department of a nondesignated hospital, unless the physician and surgeon is an emergency professional under paragraph (1).

(c) “Emergency services and care” has the same meaning as in subdivision (a) of Section 1317.1 of the Health and Safety Code.

(d) “EMTALA” means the Emergency Medical Treatment and Labor Act, and regulations adopted pursuant thereto, as defined in Section 1395dd of Title 42 of the United States Code.

(e) “Nondesignated hospital” means a general acute care hospital, as defined in subdivision (a) of Section 1250 of the Health and Safety Code or an acute psychiatric hospital, as defined in subdivision (b) of Section 1250 of the Health and Safety Code, that is not a designated facility.

(f) “Psychiatric emergency medical condition” has the same meaning as in subdivision (k) of Section 1317.1 of the Health and Safety Code.

(g) *“Psychiatric professional” means a physician and surgeon who is board certified or pursuing board certification in psychiatry and who is providing specialty services to the emergency department of a nondesignated hospital.*

~~(g)~~

1 (h) “Qualified licensed person” means a licensed person
2 designated by the medical staff and governing body of a
3 nondesignated hospital to provide emergency services and care,
4 to the extent permitted by applicable law, in an emergency
5 department of the nondesignated hospital under the supervision
6 of a physician and surgeon.

7 ~~(h)~~

8 (i) “Stabilized” has the same meaning as in subdivision (j) of
9 Section 1317.1 of the Health and Safety Code.

10 5150.11. (a) The Legislature finds and declares all of the
11 following:

12 (1) A person who has been detained for evaluation and treatment
13 pursuant to Section 5150 should be taken to a designated facility
14 rather than an emergency department of a nondesignated hospital.

15 (2) A person who has been detained for evaluation and treatment
16 pursuant to Section 5150 should be detained in an emergency
17 department of a nondesignated hospital only for the time necessary
18 to provide required emergency services and care and obtain medical
19 clearance, unless the person requires an admission for inpatient
20 services.

21 (3) A person who has been detained for evaluation and treatment
22 pursuant to Section 5150 has the right to receive a prompt
23 assessment to determine the appropriateness of the detention and
24 the need for evaluation and treatment at a designated facility.

25 (b) It is also the intent of the Legislature that nothing in this
26 chapter shall be construed to require a peace officer or any other
27 authorized professional to take a person detained for evaluation
28 and treatment to an emergency department of a nondesignated
29 hospital instead of taking the person to a designated facility, unless
30 the peace officer or authorized professional reasonably determines
31 that the person is in need of emergency care and services that
32 should be provided at an emergency department of a nondesignated
33 hospital before the person is transported to a designated facility.

34 5150.12. (a) This section shall apply to a person who has been
35 detained for evaluation and treatment by a peace officer or an
36 authorized professional and is taken to an emergency department
37 of a nondesignated hospital for emergency services and care.

38 (b) While the person is in the emergency department of the
39 nondesignated hospital, the detention of the person for evaluation

1 and treatment shall continue, unless the person is released from
2 detention pursuant to Section 5150.15 or 5150.16.

3 5150.13. (a) This section shall apply if, during a person's
4 examination or treatment in an emergency department, there is a
5 need for a *determination of probable cause* ~~determination that for~~
6 ~~the detention of the person should be detained~~ for evaluation and
7 treatment.

8 (b) If a person who has not been detained for evaluation and
9 treatment has signs or symptoms, in the judgment of the treating
10 emergency professional, that indicate probable cause for detention
11 for evaluation and treatment, the person shall have the right to a
12 prompt probable cause determination in accordance with any of
13 the following:

14 (1) The hospital may contact the county to arrange for a probable
15 cause determination by an authorized professional, including, but
16 not limited to, a member of a mobile crisis team.

17 (2) (A) If the county in which the nondesignated hospital is
18 located has a local or regional liaison, the hospital may contact the
19 local or regional liaison to arrange for an authorized professional
20 to provide a prompt probable cause determination of the person.

21 (B) The local or regional liaison shall advise the nondesignated
22 hospital within 30 minutes of the time of the initial contact whether
23 an authorized professional can perform the probable cause
24 determination within two hours from the time of the initial contact
25 with the local or regional liaison.

26 (C) The probable cause determination shall be based solely on
27 the criteria for detaining a person for evaluation and treatment.
28 The probable cause determination shall not consider the availability
29 of beds or services at designated facilities within or outside of the
30 county.

31 (D) The probable cause determination may be conducted by an
32 authorized professional utilizing telehealth.

33 (3) The treating emergency professional may conduct a probable
34 cause determination and, upon a finding of probable cause, detain
35 the person for evaluation and treatment in accordance with Sections
36 5150 and 5150.3.

37 (c) If the person is detained for evaluation and treatment
38 pursuant to this section, the detention shall continue during his or
39 her stay in the emergency department of a nondesignated hospital,
40 unless the person is released from detention pursuant to Section

1 5150.15 or 5150.16 or the detention ends by reason of the
2 expiration of 72 hours pursuant to subdivision (a) of Section 5150.

3 5150.14. (a) This section shall apply to a person who is *first*
4 detained pursuant to Section 5150 for evaluation and treatment in
5 a nondesignated hospital emergency department or has been
6 detained pursuant to Section 5150 for evaluation and treatment ~~by~~
7 ~~a peace officer~~ and *first* taken to an emergency department of a
8 nondesignated hospital.

9 (b) (1) Except as provided in subdivision (e), the nondesignated
10 hospital shall notify the county in which the nondesignated hospital
11 is located of the person's detention ~~status~~.

12 (2) If the person was detained for evaluation and treatment and
13 taken to the emergency department of the nondesignated hospital
14 pursuant to Section 5150.12, the notification shall occur after the
15 hospital has performed an initial medical screening of the person
16 in accordance with paragraphs (1) and (2) of subdivision (a) of
17 Section 1317.1 of the Health and Safety Code.

18 (3) If the person is first detained for evaluation and treatment
19 in the emergency department of the nondesignated hospital
20 pursuant to Section 5150.13, the notification shall occur when the
21 probable cause determination has been completed.

22 (c) The notification to the county shall be made using the
23 24-hour toll-free telephone number established by the county's
24 mental health program for psychiatric emergency services and
25 crisis stabilization if the county's mental health program has a
26 24-hour toll-free telephone number in operation on January 1,
27 2016, for this purpose. The notification shall be documented in
28 the patient's medical record.

29 (d) The nondesignated hospital shall advise the county of all of
30 the following:

31 (1) The time when the 72-hour detention period for evaluation
32 and treatment expires.

33 (2) An estimate of the time when the person will be medically
34 stable for transfer to a designated facility.

35 (3) The county in which the person resides, if known.

36 (e) The notification to the county under this section shall not
37 be required if the treating emergency professional determines that
38 the person will be admitted, pursuant to Section 5150.16, to an
39 acute care bed of a nondesignated hospital for the primary purpose

1 of receiving acute inpatient services for a medical condition that
2 is in addition to the person's psychiatric condition.

3 5150.15. (a) This section shall establish a process for releasing
4 ~~from detention a person from detention for evaluation and treatment~~
5 ~~during the period of who has been detained for evaluation and~~
6 ~~treatment during the time that the person is receiving emergency~~
7 ~~services and care detained~~ in the emergency department of a
8 nondesignated hospital.

9 (b) If the treating emergency professional determines that there
10 is no longer probable cause to continue the detention for evaluation
11 and treatment, the treating emergency professional may initiate a
12 followup probable cause determination to determine whether the
13 person may be released from detention for evaluation and
14 treatment. The followup probable cause determination shall be
15 made in accordance with either of the following:

16 (1) The hospital may contact the county, or a local or regional
17 liaison if authorized by the county, to arrange for an authorized
18 professional to perform a followup probable cause determination
19 to determine whether the person may be released from detention
20 for evaluation and treatment. If a county or a local or regional
21 liaison cannot arrange for an authorized professional to make the
22 determination within two hours of the initial call to the county or
23 the local or regional liaison *and there is no probable cause for*
24 *detention*, the treating emergency professional may perform a
25 followup probable cause determination to determine whether the
26 person may be released from detention for evaluation and
27 treatment.

28 (2) The treating emergency professional, without first contacting
29 the county or a local or regional liaison, may perform a followup
30 probable cause determination to determine whether the person
31 may be released from detention for evaluation and treatment.

32 (c) The determination under this section to release a person from
33 detention for evaluation and treatment shall be based *solely* on
34 whether there is probable cause to continue the detention for
35 evaluation and treatment. The determination to continue *the*
36 *detention* or to release the person from detention shall not be based
37 on the availability of beds or services at designated facilities within
38 or outside of the county, *or on anything other than whether there*
39 *is probable cause for detention*.

(d) The followup probable cause determination under this section may be conducted by an authorized professional utilizing telehealth.

(e) *The followup probable cause determination under this section may be conducted by a psychiatric professional.*

5150.16. (a) This section shall apply to a person detained for evaluation and treatment who is admitted to a *nonpsychiatric unit of a* general acute care hospital ~~bed~~ for acute medical services. This section shall apply to all general acute care hospitals, including general acute care hospitals that are designated facilities.

(b) If the person detained for evaluation and treatment is admitted to a *nonpsychiatric unit of a* general acute care hospital ~~bed~~ for the primary purpose of receiving acute inpatient services for a medical condition that is in addition to the person's psychiatric condition, the effect on the detention for evaluation and treatment while receiving acute medical services shall be as follows:

(1) If the hospital offers to provide assessment, evaluation, and crisis intervention services and the person consents to the services on a voluntary basis in addition to acute medical ~~services, the detention for evaluation and treatment shall be released~~ services, *the person shall be released from detention.*

(2) If the hospital offers to provide assessment, evaluation, and crisis intervention services and the person refuses *or is unable* to consent to the services on a voluntary basis in addition to acute medical services, the detention for evaluation and treatment shall continue in effect during the acute hospital stay, *for so long as there continues to be probable cause for the detention.*

(3) If the hospital does not have the capability to provide assessment, evaluation, and crisis intervention services, *the person shall be released from detention for evaluation and treatment shall be released.*

(c) The release of the person from detention for evaluation and treatment shall be communicated to the person and documented in the person's medical record.

(d) This section shall not apply to a person detained for evaluation and treatment who meets both of the following:

(1) The person does not require acute inpatient services for a medical condition.

1 (2) The person is awaiting a transfer to a designated facility and
2 is placed in an acute bed of the nondesignated hospital for the
3 purpose of securing the protection of the person or other persons,
4 or both, in the nondesignated hospital pending the transfer of the
5 person to a designated facility.

6 (e) In all cases described in subdivision (b), if the discharge
7 plan for the patient provides for followup evaluation and treatment
8 at a psychiatric facility, the patient shall be advised of the
9 recommended need for the followup evaluation and treatment.

10 (f) If the person is not able or willing to accept treatment on a
11 voluntary basis, or to accept the referral or transfer to a psychiatric
12 facility, the hospital shall obtain a new probable cause
13 determination for detention for evaluation and treatment pursuant
14 to Section 5150 in order to take or cause the person to be taken to
15 a designated facility. Upon request by the hospital, a county shall
16 arrange for an authorized professional to conduct a probable cause
17 determination in a timely manner, which may be performed by the
18 authorized professional utilizing telehealth.

19 5150.17. (a) This section, together with Sections 5150.18 and
20 5150.19, shall apply to the placement ~~with~~ *in* a designated facility
21 of a person in a nondesignated hospital emergency department
22 who has been detained for evaluation and treatment.

23 (b) The person may be placed ~~with~~ *in* any designated facility
24 that has the capability to meet the needs of the person, including
25 a designated ambulatory facility.

26 (c) ~~If Prior to placement is made with~~ *in* a designated
27 ambulatory facility, personnel at the designated ambulatory facility
28 shall confirm whether the facility can meet the needs of the person
29 within the scope of its designation and capability.

30 5150.18. (a) This section shall apply to the placement ~~with~~ *in*
31 a designated facility for a person described in Section 5150.17 if
32 the person has a psychiatric emergency medical condition.

33 (b) If a person, in the judgment of the treating emergency
34 professional, has a psychiatric emergency medical condition, the
35 placement ~~with~~ *in* a designated facility shall be made as follows:

36 (1) The placement may be ~~with~~ *in* any designated facility that
37 has the capability and capacity to provide evaluation and treatment
38 for the person, whether that designated facility is located within
39 or outside of the county of the hospital.

1 (2) The treating emergency professional shall determine the
2 mode of transportation, including personnel and equipment, that
3 are appropriate for the transport of the person to the designated
4 facility.

5 (3) In the event of a disagreement as to whether the person under
6 this section has a psychiatric emergency medical condition, the
7 judgment of the treating emergency professional shall prevail.

8 (4) The placement of a person described in this subdivision shall
9 take precedence over provider networks.

10 (c) If the person, in the judgment of the treating emergency
11 professional, does not have a psychiatric emergency medical
12 condition, the placement of the person ~~with~~ *in* a designated facility
13 for evaluation and treatment shall be deemed to be made for a
14 medical reason within the meaning of Section 1317.2 of the Health
15 and Safety Code.

16 (d) This section shall also apply to a person who ~~is~~ *has been*
17 medically ~~clear~~ *stabilized*, but is being held in an inpatient unit of
18 the nondesignated hospital for the purposes of ensuring the safety
19 and security of the person or other persons, pending placement of
20 the person ~~with~~ *in* a designated facility for evaluation and
21 treatment.

22 (e) *If a person detained for evaluation and treatment is in the*
23 *emergency department of a nondesignated hospital, or in a bed*
24 *not licensed for psychiatric care, the nondesignated hospital shall*
25 *make good faith efforts to arrange placement for the person in a*
26 *designated facility and, pending placement, shall provide further*
27 *screening, treatment, and monitoring consistent with the needs of*
28 *the patient and within the capacity of the hospital.*

29 5150.19. (a) This section describes assistance that may be
30 available to an emergency department of a nondesignated hospital
31 for the placement ~~with~~ *in* a designated facility of a person described
32 in Section 5150.17.

33 (b) If a person has been taken to or detained by a
34 county-authorized professional in the emergency department of
35 the nondesignated hospital, the authorized professional shall assist
36 the nondesignated hospital in arranging for the placement of the
37 person with an appropriate designated facility.

38 (c) If a person is detained for evaluation and treatment by a
39 peace officer or a treating emergency professional in the emergency
40 department of the nondesignated hospital, the hospital may contact

1 the local or regional liaison, if authorized for the county in which
2 the nondesignated hospital is located, to assist the hospital in
3 arranging for the placement of the person ~~with~~ *in* a designated
4 facility, as follows:

5 (1) Contact with the local or regional liaison may be initiated
6 when the treating emergency professional has ~~determined that the~~
7 ~~person is medically clear~~ *stabilized the person* for placement ~~with~~
8 *in* a designated facility.

9 (2) The hospital shall inform the *county or the* local ~~and~~ or
10 regional liaison whether the person has a psychiatric emergency
11 medical condition that requires a transport of the person in
12 accordance with the EMTALA obligations for making an
13 appropriate transfer.

14 (d) A nondesignated hospital ~~may pursue~~ *shall make* efforts to
15 obtain placement of the person *in a designated facility* without
16 first contacting the *county or the* local or regional liaison under
17 this section or in addition to requesting assistance that may be
18 provided by the *county or the* local or regional liaison.

19 5150.20. (a) The determination of probable cause to detain a
20 person for evaluation and treatment shall be independent of a
21 determination as to whether the person has a psychiatric emergency
22 medical condition for the provision of emergency services and
23 care.

24 (b) A determination of probable cause to detain a person for
25 evaluation and treatment, whether by a peace officer or an
26 authorized professional, shall not be deemed to constitute a
27 psychiatric emergency medical condition unless a treating
28 emergency professional *or psychiatric professional* has determined
29 that the person has a psychiatric emergency medical condition.

30 (c) A determination by a treating emergency professional *or a*
31 *psychiatric professional* that a person has a psychiatric emergency
32 medical condition shall not be deemed to constitute probable cause
33 under Section 5150 that the person may be detained for evaluation
34 and treatment.

35 (d) A determination by a treating emergency professional *or a*
36 *psychiatric professional* that a person detained for evaluation and
37 treatment does not have a psychiatric emergency medical condition,
38 or that the person's psychiatric emergency medical condition is
39 stabilized, shall not be deemed to constitute a release of the person
40 from detention for evaluation and treatment.

1 5150.21. (a) A nondesignated hospital and the professional
2 staff of the nondesignated hospital shall not be civilly or criminally
3 liable for ~~transferring~~ *the transfer of* a person detained for
4 evaluation and treatment to a designated facility in accordance
5 with this article.

6 (b) The peace officer or authorized professional responsible for
7 the detention of the person for evaluation and treatment who
8 transfers the custody of the person to an emergency professional
9 of a nondesignated hospital, shall not be civilly or criminally liable
10 for any of the following:

11 (1) The continuation and enforcement of the detention for
12 evaluation and treatment during the person's stay in the emergency
13 department of the nondesignated hospital prior to the discharge of
14 the person *from the hospital* in accordance with this article.

15 (2) The release of the person from detention for evaluation and
16 treatment in accordance with this article.

17 (3) The transfer of the person detained for evaluation and
18 treatment to a designated facility in accordance with this article.

19 SEC. 17. Article 1.2 (commencing with Section 5150.30) is
20 added to Chapter 2 of Part 1 of Division 5 of the Welfare and
21 Institutions Code, to read:

22
23 Article 1.2. Voluntary Patients
24

25 5150.30. (a) A provider of ambulance services licensed by the
26 Department of the California Highway Patrol or operated by a
27 public safety agency, and the employees of those providers who
28 are certified or licensed under Section 1797.56 of the Health and
29 Safety Code, shall be authorized to transport a person who is
30 ~~transferring in a hospital or facility~~ on a voluntary basis to a
31 designated facility for psychiatric treatment. This section shall
32 apply to transfers from any type of facility, including nondesignated
33 hospitals and other facilities.

34 (b) A person shall not be detained for evaluation and treatment
35 solely for the purpose of transporting the person, or transferring
36 the person by a provider of ambulance services, to a designated
37 facility or an emergency department of a nondesignated hospital.

38 (c) Not later than July 1, 2016, the department shall adopt and
39 make available a standardized form that will enable voluntary
40 patients to consent to transfer between facilities by a provider of

1 ambulance services. The form shall be provided to voluntary
2 patients to sign before the ~~arrival of the provider of ambulance~~
3 ~~services~~ *transfer of the patient*. The form shall be kept in the
4 patient's chart. Copies of the form shall be given to the patient and
5 the provider of ambulance services.

6 (d) This section shall apply to all patients who are on voluntary
7 status, regardless of whether the person was previously detained
8 for evaluation and treatment at any point during the course of
9 treatment at a nondesignated hospital or designated facility prior
10 to the transfer.

11 (e) No person shall require a person to be subject to detention
12 for evaluation and treatment for the purpose of authorizing or
13 providing evaluation, treatment, or admission to a facility, or as a
14 condition for providing or paying for medical services, care, or
15 treatment, including emergency services and care, unless there is
16 probable cause under Section 5150 to detain the person for
17 evaluation and treatment and the person cannot be properly served
18 on a voluntary basis. Nothing in this part shall be construed as
19 preventing a person subject to detention for evaluation and
20 treatment from receiving evaluation or treatment on a voluntary
21 basis unless there has been an adjudication under this part that the
22 person lacks the capacity to do so.

23 SEC. 18. The heading of Article 1.3 (commencing with Section
24 5151) is added to Chapter 2 of Part 1 of Division 5 of the Welfare
25 and Institutions Code, to read:

26
27 Article 1.3. Admission to a Designated Facility
28

29 SEC. 19. Section 5151 of the Welfare and Institutions Code is
30 amended to read:

31 5151. (a) If a designated facility for evaluation and treatment
32 admits the person, it may detain him or her for evaluation and
33 treatment for a period not to exceed 72 hours from the time that
34 the person was initially detained pursuant to subdivision (a) of
35 Section 5150.

36 (b) Prior to admitting a person to the facility for ~~treatment and~~
37 evaluation *and treatment*, the professional person in charge of the
38 facility or his or her designee shall conduct an assessment of the
39 individual in person to determine the appropriateness of the
40 involuntary detention.

1 SEC. 20. Section 5151.1 is added to the Welfare and
2 Institutions Code, to read:

3 5151.1. If the assessment results in a determination that the
4 person is in need of mental health services, but he or she is not
5 admitted to the facility, the designated facility shall provide the
6 person with appropriate referrals and a list of alternative services
7 and other resources that are appropriate to the needs of the person.
8 The alternative services and other resources shall include both of
9 the following, as applicable:

10 (a) The services described in subdivision (b) of Section 5150.

11 (b) The services for persons with severe mental illness and
12 substance use disorders posted by a county on its Internet Web
13 site pursuant to Section 5013.

14 SEC. 21. Section 5151.2 is added to the Welfare and
15 Institutions Code, to read:

16 5151.2. (a) Each county shall establish disposition procedures
17 and guidelines with local law enforcement agencies for the safe
18 and orderly transfer of persons detained for evaluation and
19 treatment by a peace officer, who has requested notification under
20 Section 5152.1 of the person's release from detention for evaluation
21 and treatment in accordance with Section 5150.15, 5150.16, or
22 5151. The disposition procedures and guidelines shall include
23 persons who are not admitted for evaluation and treatment and
24 who decline alternative mental health services and persons who
25 have a criminal detention pending.

26 (b) The disposition procedures and guidelines should include
27 interagency communication between law enforcement agencies
28 located within the county, as well as law enforcement agencies
29 located in other counties, that take or arrange to take persons
30 detained for evaluation and treatment under Section 5150 to health
31 facilities within the county. The disposition procedures and
32 guidelines, including updates, shall be disseminated to designated
33 facilities and nondesignated hospitals.

34 SEC. 22. Section 5152.1 of the Welfare and Institutions Code
35 is amended to read:

36 5152.1. (a) A designated facility or nondesignated hospital
37 shall notify the county mental health director, or the director's
38 designee, and the law enforcement agency that employs the peace
39 officer who makes the application for detention for 72-hour
40 evaluation and treatment pursuant to Section 5150, if the person

1 admitted pursuant to Section 5152 will be discharged after a
2 72-hour inpatient admission, when the person is not admitted by
3 the designated facility, when the person discharged before the
4 expiration of the 72-hour inpatient admission, when the person
5 discharged from detention for evaluation and treatment is released
6 under Section 5150.15, 5150.16, or 5151, or if the person elopes
7 from a designated facility or nondesignated hospital, if both of the
8 following conditions apply:

9 (1) The peace officer who made the application for detention
10 for evaluation and treatment requests notification of the person's
11 release or discharge at the time he or she makes the application
12 for detention for evaluation and treatment and the peace officer
13 certified at that time in writing that the person has been detained
14 for evaluation and treatment under circumstances which, based
15 upon an allegation of facts regarding actions witnessed by the
16 officer or another person, would support the filing of a criminal
17 complaint. The application for detention for evaluation and
18 treatment shall include one or more methods of contacting a person
19 at the law enforcement agency who may receive the notification.

20 (2) The notice is limited to the person's name, address, date of
21 admission or initial service, and date of release.

22 (b) If a police officer, law enforcement agency, or designee of
23 the law enforcement agency, possesses any record of information
24 obtained pursuant to the notification requirements of this section,
25 the officer, agency, or designee shall destroy that record two years
26 after receipt of notification.

27 (c) The notice required by this section shall be made prior to
28 the release or discharge of the person, if possible. The designated
29 facility or nondesignated hospital shall consider the distance ~~of~~
30 *from* the law enforcement agency to the location of the designated
31 facility or nondesignated hospital in giving the notice. The peace
32 officer or other representative of the law enforcement agency
33 receiving the notice shall promptly advise the designated facility
34 or nondesignated hospital whether the peace officer or other law
35 enforcement agency representative shall take custody of the person
36 upon his or her release or discharge from the designated facility
37 or nondesignated hospital and, if so, the time at which the peace
38 officer or other law enforcement agency representative will be
39 present at the designated facility or nondesignated hospital.

1 (d) Nothing in this section shall be construed to require the
2 designated facility or nondesignated hospital to delay the discharge
3 of a person for purposes of awaiting the arrival of the peace officer
4 or another representative of the law enforcement agency.

5 SEC. 23. Section 5152.2 of the Welfare and Institutions Code
6 is repealed.

7 SEC. 24. Section 5152.2 is added to the Welfare and
8 Institutions Code, to read:

9 5152.2. In addition to the request for notification set forth in
10 the application for detention for evaluation and treatment, each
11 law enforcement agency shall arrange with the county mental
12 health director for a method for designated facilities and
13 nondesignated hospitals to give prompt notification to peace
14 officers under Section 5152.1. The methods for notification for
15 each county shall be disseminated by the county to the designated
16 facilities and nondesignated hospitals located within the county.

17 SEC. 25. Section 5153 of the Welfare and Institutions Code is
18 amended to read:

19 5153. Whenever possible, officers charged with apprehension
20 of persons pursuant to this chapter shall dress in plain clothes and
21 travel in unmarked vehicles.

22 SEC. 26. Section 5270.50 of the Welfare and Institutions Code
23 is amended to read:

24 5270.50. (a) Notwithstanding Section 5113, if the provisions
25 of Section 5270.35 have been met, the professional person in
26 charge of the facility providing intensive treatment, his or her
27 designee, the medical director of the facility or his or her designee
28 described in Section 5270.53, the psychiatrist directly responsible
29 for the person's treatment, or the psychologist shall not be held
30 civilly or criminally liable for any action by a person released
31 before the end of 30 days pursuant to this article.

32 (b) The professional person in charge of the facility providing
33 intensive treatment or his or her designee, the medical director of
34 the facility or his or her designee described in Section 5270.35,
35 the psychiatrist directly responsible for the person's treatment, or
36 the psychologist shall not be held civilly or criminally liable for
37 any action by a person released at the end of the 30 days pursuant
38 to this article.

39 (c) The attorney or advocate representing the person, the
40 court-appointed commissioner or referee, the certification review

- 1 hearing officer conducting the certification review hearing, and
- 2 the peace officer responsible for detaining the person shall not be
- 3 civilly or criminally liable for any action by a person released at
- 4 or before the end of 30 days pursuant to this article.

O